



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Joshi, Dr. Yogendra

Group Art Unit: 3743

Serial Number: 09/828,564

Examiner: Patel, Nihir B.

Filed: April 6, 2001

For: ORIENTATION-INDEPENDENT THERMOSYPHON HEAT SPREADER

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
UNDER 37 C.F.R. § 1.56 AND 37 C.F.R. § 1.97**

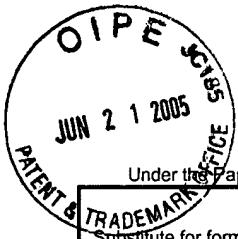
It is respectfully requested that the documents listed on the attached Form PTO/SB/08A be considered by the Patent and Trademark Office in the above-referenced application and made of record therein. Full text copies of the relevant documents are enclosed. The requisite fee pursuant to CFR §1.17(p) is enclosed herewith.

Respectfully submitted,

By: Matthew Witsil

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21 June 2005
Date



PTO/SB/08a (08-03)

Approved for use through 07/31/2006. OMB 0651-0031
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SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Sheet

1

of

1

Complete if Known

Application Number	09/828,564
Filing Date	April 6, 2001
First Named Inventor	Joshi, Dr. Yogendra
Art Unit	3743
Examiner Name	Patel, Nihir

Attorney Docket Number

361007-000012

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
		US-			

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)				

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	A	INTERNATIONAL SEARCHING AUTHORITY, International Application No., PCT/US02/10110, International Search Report, October 8, 2002, Applicant: University of Maryland, College Park.	
	B	EUROPEAN PATENT OFFICE, European Application No. 02 733 928.2, Communication Pursuant to Article 96(2) EPC, November 24, 2004, Applicant: University of Maryland, College Park.	

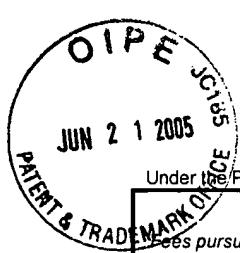
Examiner Signature	Date Considered
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
		Application Number	09/828,564
		Filing Date	April 6, 2001
		First Named Inventor	Joshi, Dr. Yogendra
		Examiner Name	Patel, Nihir
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	3743
TOTAL AMOUNT OF PAYMENT	(\$) 180.00	Attorney Docket No.	361007-000012

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>13-4365</u> Deposit Account Name: <u>Moore & Van Allen PLLC</u>				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s)		<input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
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- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Supplemental Information Disclosure Statement \$180.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent) <u>47,183</u>	Telephone <u>(919) 286-8000</u>
Name (Print/Type)	<u>Matthew W. Witsil</u>		
	Date <u>06/21/2005</u>		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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